

Kansas Department of Health and Environment (KDHE) would like to share the following tips and attached resources for preparing a communications strategy for dealing with media interest in Ebola cases in the U.S.:

- Go ahead and do an Ebola Drill - get everybody around a table and plan for what might happen.
- Use CDC and KDHE; save yourself, use the resources in this toolkit for an Ebola communication response and familiarize yourself with the information available at <http://www.cdc.gov/vhf/ebola/index.html> and [www.kdheks.gov/ebola](http://www.kdheks.gov/ebola).
- Connect with your local community, media, health departments, etc. KDHE has begun hosting a weekly call with key partners across the state. Don't be afraid to localize these strategies by gathering your local and regional partners.
- Start now with identifying some potential depth to your PIO team. Pull in a large PIO team, and draw from other agencies, if possible, to handle enormous workload of watching social media, responding to interview requests, arranging spokespeople, coordinating with others, etc.
- Rumor control - It's very difficult to monitor the media and what's being said on social networks, but do your best. This is also a great area to enlist the help of your community partners, especially if the use a media monitoring program.
- If you do have a confirmed case of Ebola in your community, change your voice mail to say you're in the midst of the Ebola response. Ask people to leave a message and say you will get back to them as timely as possible. You may also want to include general resources on Ebola in your voicemail such as a web address or email contact.
- Decide on stance for interviews and be consistent with that decision.
- Develop separate list of reporters interested in Ebola and make sure they're constantly up-to-date.

PIOs can contact the KDHE Office of Communications at [communications@kdheks.gov](mailto:communications@kdheks.gov).

Health care facilities, clinics and physicians can contact [response2014@kdheks.gov](mailto:response2014@kdheks.gov) for questions about the response plan and guidance.

# Ebola: Frequently Asked Questions

Updated October 14, 2014

- There is an Ebola outbreak in the West African countries of Guinea, Liberia and Sierra Leone.
- There have been no cases of Ebola in Kansas.

## What is Ebola?

- Ebola is a serious, often deadly disease, mostly found in Africa, caused by a virus that can occur in humans and some animals.
- Symptoms of Ebola usually appear 8-10 days after coming into contact with body fluids of someone infected with Ebola who is showing symptoms, but can appear up to 21 days after exposure.
- Symptoms include:
  - Fever
  - Headache
  - Joint and muscle aches
  - Weakness
  - Diarrhea
  - Vomiting
  - Stomach Pain
  - Lack of appetite
  - Abnormal bleeding

## How do people get Ebola?

- Ebola is spread by direct contact with bodily fluids (blood, vomit, urine, sweat, breast milk) of someone who is infected with Ebola and is showing symptoms or someone who has recently died of Ebola.
- Ebola can only be spread from one person to another when the person infected with Ebola is showing symptoms.
- Ebola is not spread through water, air or food.
- Ebola is not spread through casual contact.

## Who can spread Ebola to others?

- For a person to spread Ebola to others, they must have:
  1. Been in areas within the last 21 days where Ebola disease is occurring, **AND**
  2. Been in contact with the blood or body fluids (blood, vomit, urine, sweat, breast milk) of a person with Ebola who is showing symptoms or a person who has recently died from Ebola, **AND**
  3. Developed Ebola symptoms.

## What would Kansas do if there was a case of Ebola?

- Healthcare workers in Kansas are on alert to identify people who have traveled to the West African countries where the Ebola outbreak is occurring and who are showing symptoms of Ebola.
- All hospitals in Kansas are equipped with the standardized and effective infection control measures required to control and contain Ebola.
- A hospital would isolate the patient in a single room, with a private bathroom. The door to the room would be closed at all times and visitors would be limited to healthcare workers.
- Healthcare workers providing care would protect themselves with protective equipment (gloves, gowns, masks and other equipment).
- All disposable medical equipment would be packaged and disposed of following hazardous waste practices. Non-porous durable medical equipment can be cleaned and disinfected with a U.S. EPA-registered hospital disinfectant.

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- Infectious disease investigations would occur to identify people who have come in contact with the Ebola patient or their bodily fluids while they were showing symptoms. People identified would be monitored for a fever.

### **Is it safe to travel overseas?**

- Yes, it is safe to travel overseas.
- If you are planning on traveling outside the United States, check the CDC's Travelers' Health website for updates on travel notices: <http://wwwnc.cdc.gov/travel/notices/>.

### **Should I avoid contact with someone who has recently traveled to West Africa?**

- No, you do not need to avoid casual contact with someone who has recently traveled to a country where an Ebola outbreak is occurring.
- Ebola is spread through direct contact with bodily fluids (blood, vomit, urine, sweat, breast milk) of someone showing symptoms of Ebola.
- A person who recently traveled to West Africa and has symptoms of Ebola should contact their healthcare provider and tell them about their travel history. Healthcare providers will evaluate their risk for Ebola as well as other more common infections of West Africa such as malaria and typhoid.

### **How is Ebola treated?**

- There is no specific medication that cures Ebola and no vaccine to prevent it.
- Treatment of an Ebola patient is supportive, meaning providing fluids, maintaining blood pressure, and providing blood transfusions as needed.

### **Where can I get more information about Ebola?**

- Information about Ebola virus disease can be found on the Centers for Disease Control and Prevention website: [www.cdc.gov/vhf/ebola](http://www.cdc.gov/vhf/ebola)

**IMMEDIATE RELEASE**

[Date]

Contact: [Name]

[Phone Number]

[Email Address]

**[Organization Name] Is Ready to Respond in the Event of Ebola**

**TOPEKA, Kan.** – [Organization name] has been working with the Kansas Department of Health and Environment (KDHE) and the public health system in [city or county name] to quickly and effectively respond in the event of a case of Ebola in [city or county name]. Kansas has not had any confirmed cases of Ebola at this time.

[Quote from organization administrator/CEO]

Ebola virus disease is spread only through direct contact with bodily fluids of a person who is sick and showing symptoms. Symptoms of Ebola include: fever, headache, joint and muscle aches, weakness, diarrhea, vomiting, stomach pain and lack of appetite. Symptoms usually appear 8-10 days, but may appear up to 21 days after exposure to bodily fluids of a person showing symptoms of Ebola. Most cases related to this Ebola outbreak have been contracted in the West African countries of Guinea, Liberia and Sierra Leone.

[Quote from community partner]

[Organization name] is working with community partners regarding the need for standardized and effective infection control measures required to control and contain Ebola virus disease. If a patient had a suspected or confirmed case of Ebola, hospitals would be required to isolate the patient in a private room with a bathroom. The door to the room would need to be closed at all times and all visitors would need to be restricted and would need to follow infection control measures per hospital protocols. Healthcare workers would be required to protect themselves from Ebola by wearing protective clothing and equipment to prevent contact with bodily fluids.

Kansas has recommended additional guidance for healthcare workers who have been exposed to Ebola above and beyond the Centers for Disease Control and Prevention's guidelines. Kansas requires any healthcare worker who has been exposed to Ebola to be excluded from providing direct patient care for a 21 day period following the last exposure. KDHE has also recommended and provided resources for hospitals and healthcare workers, including EMS, to re-train on how to properly put on and take off protective equipment. If someone is diagnosed with Ebola, an investigation would immediately occur to identify people who may have come in contact with the Ebola patient while they were showing symptoms. Those people identified would be monitored for signs of Ebola, including fever.

For additional information about Ebola visit [www.cdc.gov/ebola](http://www.cdc.gov/ebola) or [www.kdheks.gov/ebola](http://www.kdheks.gov/ebola).

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*KDHE's mission is to protect and improve the health and environment of all Kansans.*

Current Situation Message Map

<b>Key Message 1</b>	<b>Key Message 2</b>	<b>Key Message 3</b>
Ebola virus disease is only spread through direct contact with blood or other bodily fluids of a person who is sick with Ebola.	Ebola poses no substantial risk to the general population in the U.S. The CDC and U.S. healthcare system can control imported cases of Ebola and can control the spread of the disease within the U.S.	The healthcare system is prepared and ready to respond in the event of a confirmed Ebola case in Kansas.
<b>Supporting Fact 1-1</b>	<b>Supporting Fact 2-1</b>	<b>Supporting Fact 3-1</b>
Symptoms include: fever, headache, joint and muscle aches, weakness, diarrhea, vomiting, stomach pain and lack of appetite and usually appear 8-10 days after exposure, but may appear up to 21 days after exposure.	Healthcare workers are on alert to identify people who have traveled to the affected countries and who are showing symptoms of Ebola. Suspected cases will be isolated until testing results are received.	All hospitals in Kansas are equipped with the standardized and effective infection control measures required to control and contain Ebola.
<b>Supporting Fact 1-2</b>	<b>Supporting Fact 2-2</b>	<b>Supporting Fact 3-2</b>
A person infected with Ebola is not contagious until symptoms appear.	If someone is diagnosed with Ebola, disease investigations will occur to identify people who may have come in contact with the Ebola patient while they were symptomatic. Those people identified may be monitored for signs of fever.	Hospitals will isolate the patient in a single room with a bathroom. Healthcare workers providing care are required to wear protective clothing to prevent bodily fluids from coming into contact with skin abrasions or mucus membranes.
<b>Supporting Fact 1-3</b>	<b>Supporting Fact 2-3</b>	<b>Supporting Fact 3-3</b>
Most cases of Ebola are concentrated in the West African countries of Guinea, Liberia, Nigeria and Sierra Leone. People with a travel history that includes the affected countries are being screened prior to boarding planes.	If you would like more information about Ebola visit <a href="http://www.cdc.gov/ebola">www.cdc.gov/ebola</a> .	Hospitals are encouraged to use disposable medical equipment when possible. All materials will be disposed of using proper medical waste disposal practices. Non-porous durable medical equipment can be cleaned and disinfected with a U.S. EPA-registered hospital disinfectant.